



CITY OF NORWALK STREET CLOSURE APPLICATION

(to request temporary closing and use of public streets or public property)

Submit this completed form to the City Clerk's Office no less than 30 days prior to the proposed event.

Application must include:

- Petition signed by not less than 75% of the properties (residential and commercial) affected by the closure.
- Map of the specific area to be used.
- Except for neighborhood block parties, Certificate of Insurance showing \$1,000,000 in liability coverage with the City of Norwalk as additional insured. (if permission is granted to serve alcoholic beverages, liquor liability insurance is also required.)

Street closures are limited to (6) hours; between 9:00 a.m. and 11:00 p.m. Sunday through Thursday, or between 9:00 a.m. and 12:30 a.m. on Friday and Saturday.

Standard barricades are required to be erected sufficient so as to completely close the street.

CONTACT INFORMATION			
Promoter's Name:		Alternate Contact Person:	
Signature:		Signature:	
Address:		Address:	
Phone Number:	Cell Phone:	Phone Number:	Cell Phone:
PD requested: Yes <input type="checkbox"/> No <input type="checkbox"/>		Signed petition attached: Yes <input type="checkbox"/> No <input type="checkbox"/>	
PW requested: Yes <input type="checkbox"/> No <input type="checkbox"/>		Preliminary map attached: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Liquor license required: Yes <input type="checkbox"/> No <input type="checkbox"/>		Insurance Certificate attached: Yes <input type="checkbox"/> No <input type="checkbox"/>	

EVENT INFORMATION	
Date of Event: _____	Rain Date of Event: _____
Street closing time: _____	Street opening time: _____
Event starting time: _____	Event finishing time: _____

EVENT INFORMATION CONTINUED

Location of Event (name streets, parks, cross intersections, etc.):

LAYOUT OF THE PROPERTY INCLUDING LOCATION OF BARRICADES: Map attached Drawing below *If the map does not accurately show the area, then a drawing should also be included.

FOR OFFICE USE ONLY

Date received:

Date of council
meeting:

Date distributed to
Department Heads:

Permit issued:

Signed off on prior to council meeting by:

City Clerk: _____

Fire Chief: _____

Police Chief: _____

Public Works Director: _____

ABD agent (if applicable): _____

City Council Approved on: _____

Mayor

MARCH 5, 2015

PETITION

NAME

ADDRESS

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.